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MEDICAL FACULTY

THE
CANADIAN NURSE
A Monthly Journal for the Nursing Profession in Canada

VOL. XII. VANCOUVER, B.C., DECEMBER, 1916 No. 12

The Canadian Nurse Magazine extends best wishes for Christmas and the New Year to all its friends.

The Nurse: Christmas Day

She gives her Day—its many memories
Of laughter and of childish happiness
She dares not once bring forth to dream upon.
She is the Minister—the one who serves;
She brings her one gift to the wards of pain
And lays it down before a child's dull eyes
(Nor does she deem it gift, or sacrifice
Or look for any thanks)—she gives herself.
All through the speeding hours she smiles,
Forgetting self—forgetting that there ever was a day
That in the world outside spelt Jollity,
Good cheer and gifts and breath of evergreen
In little village churches twined about.

But one, the Nurse who, in a mother's arms
Places an hour-old babe on Christmas Day,
Thrills to some old-time music as she toils—
Some chant of chorister, some glorious chime,
Singing and ringing in her memory.
—"For God so loved the world, so loved the world!"

—Florence Randal Livesay.

Christmas—With a Difference

The spirit of Christmas is abroad in the land. Not the Christmas of our youth, merry, irresponsible, carelessly good-natured, but a Christmas with a difference, for it is strange and sad to celebrate for the third time under the black shadow of war the birthday of the Prince of Peace.

Yet perhaps not so strange to us as to others not of our profession for we are accustomed to Christmas with a difference—the Hospital Christmas, that strange blending of mirth and tragedy so familiar to us all. The bits of holly stuck in the chart holders, the gay incongruous streamers depending from the electroliers, the Christmas tree in the children's ward are an old story to most of us. And yet every year it is strangely new, perhaps because nothing human or vital is ever old or stale.

Besides, it is all so pathetically brave, this insistence on gaiety in the face of pain and suffering, this triumph of the spirit of man over adverse circumstances. It is difficult to persuade outsiders that this triumph is real. They are quite sure that the gaiety is assumed, that it is worn like a mask by patients and nurses, to be laid wearily aside at

MEMORIAL
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the end of the day. Occasionally this attitude of mind characterizes those well intentioned persons who organize entertainments for the delectation of convalescents. "How sad!" they exclaim, "but one must pretend to be merry to cheer the poor things up." But not too merry, therefore they proceed to choose mournful musical numbers and harrowing recitations dealing with the death of impossible angel children, with frequent reference to home and mother as being "appropriate to the occasion." One particular instance lingers in my memory of a lady with evangelistic tendencies who gave a dramatic interpretation of "The Face on the Bar Room Floor," which was greeted with polite but perfunctory applause. This was followed by the spirited rendering of "Turkey in the Straw" by a convalescent amputation case, arrayed in a gray dressing gown much too small for him, on a sort of super-mouth-organ, known, I believe, as an ocarina. This man who would never dance again, set every foot tapping, every hand waving to the rhythm of the dance. He brought down the house, he proved beyond a doubt that the spirit of gaiety was a real and visible presence, for he charmed it forth with every flourish of his preposterous ocarina.

There is no mockery, therefore, in our parcels and greetings, all gay with "Merry Christmas" to our men and women overseas. True gaiety is a flower that blooms even in the foul earth of a trench and the wind of death itself cannot blight or wither it.

—E. Incledon Johns.

To A Hunchback

Thy form is shrunk, through ill-health and disease,
And sad face, white, bespeaking weariness;
Yet eyes show courage, hero's fortitude,
For thou hast conquered "mind" above the strife.
A woman lit her eyes with sympathy,
And let them meet the searching gaze of thine;
And knew not why her own were dim with tears,
And wished to comfort—though she knew not how.
She thought of Heaven, where no pain will be,
Nor sadness, ill-health, misery, nor grief;
And longed to show she felt thou would'st be there
A "perfect man," if less than perfect here.
And oft since then, when life seemed very hard,
Her outlook of some moment cold and drear,
That memory of thy sad courageous face
Has helped her discontent and troubled fear.

—M. P. Judge.

The Feeble Minded

The necessity for the care, training and protection of the feeble-minded should be a question of gravest concern in every commonwealth that aspires to make its citizens intelligent, productive and progressive, and to assure them of its safety and protection. It is a most regrettable fact that Canada is behind every other country in the Empire in the care of its mentally sub-normal population. The fact that it has its normal proportion of these unfortunates has been established wherever surveys have been made. Dr. Helen MacMurchy, Inspector for Feebleminded in the Province of Ontario, estimated that there are in Ontario alone seven thousand persons needing institutional care and training. Her labors in this field, covering a period of 15 years of most faithful and zealous service, has given us insight into conditions which we believe would be representative of the entire Dominion. And yet, excepting for the institution at Orillia, Ontario, with a capacity for 800 inmates, no provision whatever is made for the custodianship of this helpless and dangerous class of citizen!

We, before whom the cases come and go daily and almost hourly, can hold out no hope of help to those parents and guardians who are ready to break under the prolonged strain of caring for a feebleminded or epileptic person in the home. But heavy and overpowering as is the parents' burden, this is not by any means the worst feature of the situation. To allow these individuals, so lacking in common sense and self-control, to lead a free and unrestrained life in the midst of a normal population means a *constant* increasing pauperism, indecency and crime. To those acquainted with the unstable mental, moral and social behavior of defectives, the safe presence of these people in a community is known to be absolutely impossible. In two places in British Columbia—Victoria and Vancouver—a start in the work with the feeble-minded has been made through the special class in connection with the Public Schools. But the work is necessarily limited in its scope and not very far-reaching in its results. The task of educating *our* public in this subject has not yet had a beginning; and if we are to combat successfully and timely this great source of social and moral evil in our midst, we must have the interest and intelligent co-operation of every class of both professionals and laymen. The object of this paper is to state the facts of the problem in a somewhat brief and summary manner, to point out the dangers, immediate and remote, arising from the presence of defectives in the community, to suggest remedies for the evil and thus to stimulate a hearty interest in the solution of the problem in our own particular field.

The physician and nurse can be of inestimable help in the work (1) by reporting all cases to those in charge of the work; (2) by co-operating with the clinician in individual cases; (3) by getting the history of cases; (4) by holding conference for the discussion of the treatment and disposal of cases; (5) by being alert always to the signs of mental defectiveness, especially in very young children.

All individuals and agencies working in behalf of human betterment are constantly confronted with the problem of the *incompetent*—the *unfit*. They fall into three classes, classes not at all sharply defined, but rather decidedly overlapping, viz.: Dependents, delinquents and defectives. All are non-supporting and non-productive. The task of caring for them is variously assumed by the homes, by private guardians, by charitable organizations, by public agencies and institutions. The term "dependent" applies equally well to all classes, but since many persons have become *dependent* through other causes than those of mental and moral defect, for the sake of convenience we use the term to refer to those cases of insanity, pauperism, friendlessness, homelessness, misfortune, neglect and physical infirmitude, which can be traced to abnormal or unfortunate social and economic conditions—to environment rather than to heredity. Likewise the term "delinquent" refers to those anti-socialists or offenders, whose criminality is due to social or environmental rather than hereditary causes. We use the term "defective" to cover that large class of persons who, owing to absence of mental development, never reach the stage where they can manage their own affairs with prudence, or become independent and self-supporting members of a community. They are the permanent infants of the race, the children who never grow up, and as such must be cared for by others from birth to death. These have been classed as idiots, imbeciles and morons, according to their *mental* age and the following definitions agreed upon:

Idiots—Persons so defective in mind from birth or from an early age as to be unable to guard themselves from common physical dangers.

Imbeciles—Persons whose defectiveness does not amount to idiocy but is yet so pronounced as to render them entirely incapable of self-support and self protection, and whose mental age does not exceed seven years.

Morons—High grade feeble-minded whose mental development does not exceed that of a normal child of twelve years. Also

Moral Defectives—Persons who, from an early age display permanent mental defect coupled with strong vicious and criminal propensities, upon whom punishment has no deterrent effect.

The first two classes named—Idiots and Imbeciles—represent the ultra-helpless and hopeless in the struggle for existence. Their physical and mental stigmata are so well marked as to be apparent to the most casual observer. They are the ridiculed, tortured and neglected individuals, the "sillies," the "crazies," the "not all there" or the "room to let" wanderers in our highways and byways. The mental and often the physical vitality in such persons is so low as to render inevitable a very early self-extinction of their species. These are the defectives of whom a large number have been segregated and placed in institutions. They are the first always to be pointed out and provided for. The problem of

their care ends with supplying their purely physical wants and protecting them from moral, physical and social dangers.

But by far the largest and most dangerous class is the moron or borderline group. The whole modern movement for the study of mental deficiency concerns itself with the borderline type more than with any other. One of the greatest results of this modern movement in behalf of the feeble-minded has been to establish the fact that we have in our midst, besides large numbers of idiots and imbeciles, a vast population, comparatively speaking, of persons, who to the superficial observer, pass for normal, but who, upon examination are found to be *potentially* unfit for existence in a common life. They are the people who are always behind in the human procession, who are lifted only to fall again, who, in spite of all efforts to save, slip back into a horrible existence of poverty, squalor, degradation and crime. These never can be made to follow independently a decent and orderly existence, but will always be the stragglers on the human highway, so handicapped by mental incapacity that little else than sorrow, disappointment and misery await them in this mortal life. Often carried along and protected by home and friends, the extent and seriousness of their weaknesses are not detected, but let them suddenly be faced with the necessity of making their way alone in the economic and social struggle and they will be overwhelmed by the simplest demands of life. A large class of these morons are expert imitators. Possessed of little originality, they succeed in adopting the manners and customs of their fellows; they learn how to converse in a parrot-like fashion; dress in the latest styles, and up to a certain level appear quite "like other people." Sexual attraction, especially in the feminine sex, is often one of their strongest points, and they succeed in getting the attention of a dozen of the opposite sex, where a sensible person would perhaps be noticed by none. Thousands of this class marry, and, lacking in all those fundamentals of character that make for the stability and the integrity of a home, their vicious influence is only extended to blight other lives. Incapable of rising to any emergency of meeting new situations, of performing self-directed tasks, of cultivating fine tastes, of profiting by experiences, of doing any purposeful thinking, they are carried along by every passing suggestion and simply float upon a sea of suggestion, with no possibility of anchorage. And the unfairness of it is that we judge and condemn their acts on the same basis as we do those of persons possessed of a normal mind. If it is once understood that a person is not on a mental level with his fellows, that *potentially* he never can be, that he sins against society because his inferior intellect prevents him from doing anything else, then we have a sane starting point from which to study his case. We shall soon conclude that there is but *one* answer as to what shall be done with his case, and the thousands of kindred ones. He must be placed in an environment that is suited to *his* level of development; an environment that is simple in its demands, that furnishes occupation fitted to his mental capacity, that is free from the temptations and pitfalls of the ordinary life in the world. that meets

his social desires by providing wholesome and healthful recreations; and these conditions can be realized only in a colony and institutional life.

It is estimated that 25 per cent. of our criminals, juvenile and adult, belong to the moron class; 50 per cent. of our girls in homes of refuge and *more* than 50 per cent. of our paupers fall into this group; 50 per cent. of the inmates of our asylums are potential lunatics from youth; large numbers of children in our city and provincial charitable institutions are found to fall below the mental age standard.

The facts stated and figures quoted can be verified in almost any community. What shall be done about it? How shall we destroy the curse?

BERTHA WINN,
Director Child Study Laboratory,
Victoria, B. C.

December 6th, 1916.

(To be continued)

A Roving Commission

Of course it was awfully hard on Sadie getting typhoid, when she was so keen on going to the front, too, and I won't repeat the things she said when they advanced her to a square inch of milk toast, and then changed their minds and took the toast part away again. All the same it was an awfully lucky thing—the typhoid, I mean, not the toast—for if I hadn't been nearly distracted trying to find the rent of the flat all by myself, and the two back payments on the lot that the agent was clamouring for, I would never have told my woes to Effie Blackmore when I ran into her, shopping for her trousseau.

I used to lend Blackie my hot-water bag when she had been on a pickle bust, pickles being absolutely disastrous to her kind of stomach.

"Three days nursing in one month, and that not paid for," I said sombrely. "I'll see myself in the bread line yet."

"Cheer up!" said Blackie vaguely, with her eye on a $35.00 hat. "Why not get a position in a hospital, or a doctor's office?"

"Try again," I said, sternly. "The hospitals and the doctors are economizing, too, you know."

"Oh, yes, I suppose so; it's very hard, dear me! I know—the Victorian Order?"

"What about it?"

"You know the Victorian Order of District Nurses?"

"No, I don't. I seem to have heard something about some such order, but——"

"Well, you are going to hear a lot about it right now, and you ought to be ashamed of yourself!" said Blackie, briskly. "It's the very thing for you. I substituted for one of their nurses for two months, and I'd have joined out and out only I got engaged instead. Look here, we'll go and have some tea, I can't settle to hats again until I have had tea, and we'll talk it over."

Well, that was the beginning of it. It was just a month later that they gave Sadie her choice between seeing me for twenty minutes or getting up for five, and chose me, which I thought very nice of her, until she looked me over disapprovingly.

"What have you got on?" she demanded.

"Clothes," I responded, meekly.

"What on earth are you doing out doors in a gingham dress? It shows inches and inches below your coat."

"I chose this particular variety of bed-ticking for my probation dresses because it withstands the laundry so well," I replied, "and I got off rather late for my half-day and did not stop to change."

I had flattered myself that this was a mild and tactful way of introducing Sadie to the changed scene of my labours, but she jumped as if I had run a hat pin into her.

"Probation dress! Half-day!" she repeated, shrilly, "Why, what! aren't you private nursing any more?"

"No, my child. In the language of the poet, 'nothing doing.' People have cut out private nurses along with their other luxuries. I am now engaged in taking the post-graduate course in the Victorian Order of District Nurses, earning $25.00 a week during the course, three meals a day, and a sound and dreamless sleep each night. Except when I am hauled ruthlessly forth to attend on the stork, which occurs about one night in every four or five."

Sadie gasped. "But why? But what? I never knew!"

"That is your disgraceful ignorance," I retorted, severely. "You pampered private nurses don't know a thing outside your own narrow, petty little groove. If you went into the homes of the poor, and welcomed the babies of the proletariat—they're long on babies, if they are short of everything else—and cheered the sick and afflicted, in the by-ways of the city, like the district nurses, instead of spending half your time with your patient's flowers and hair."

"Well, I like that!" Sadie interrupted, wrathfully, recovering her breath just as mine threatened to give out, "and a month ago you—I suppose you don't trouble about the patient's hair in the Victorian Order?"

"Oh, yes, we do, when we can find out what the baby—the previous year's baby—has done with the comb; but we attend strictly to the essentials in the Victorian Order. We do up an obstetrical case, including the baby, of course, full sponge and changing the bed linen and writing

up the chart, in something less than an hour. Not that I have achieved it yet, but I shall in time. The really smart ones do it in three-quarters."

"That's going some," Sadie admitted. "It's the beautiful, simple, uniform system," I explained, with as much pride as if I had invented it myself, "and it's the same from the Atlantic to the Pacific, so that an obstetrical patient might have a different nurse for each of her ten days, and if she kept her eyes shut and the nurses kept their mouths shut, she would never know the difference. Of course," I settled myself luxuriously in the deep arm-chair, "you have to allow a few moments' variation in the time for different conditions. Where you have an admiring grandmother and three maiden aunts, for instance, to lay everything ready to your hand, and a tank full of hot water and all that, your work is one grand sweet song; but when you land in a place where you have to collect the baby's clean—semi-clean—duds from the four winds of heaven, and borrow a kettle of boiling water from next door, and tip the potatoes from the general utility basin before you can sponge the patient, and chase a squad of urchins out-doors before you can begin to do anything—why, you are a bit longer in getting through."

"I suppose it is chiefly obstetrical?" Sadie inquired.

"Chiefly; but we have our case-bags, jolly neat they are, too, furnished to be ready for anything, from a broken neck—I mean rib—or a bad scald, to nephritis or pneumonia. But, of course, it's mostly obstetrics—welcoming the little human flowerets that bloom along life's dusty—Oh, I say, speaking of dust, my first case was the limit. The senior nurse, that is the one nearest through the course, has to initiate the new ones into the Order's way of running the confinement case, unless it comes off in the dog time, when the assistant superintendent does it, but my turn came my second night, and I trotted out at about 3 a. m. It wasn't one of the booked cases, the woman hadn't made any preparations at all, having only nine months to make 'em in, but a neighbor had bobbed out and 'phoned the city doctor, and he 'phoned us to find out how things were and to let him know.

Well, it was like getting the bathtubs and things to scrub first in one's real probation days, the worse first. The senior nurse said that I would never strike anything worse, and I don't see how I could. I know that woman hadn't had a bath since her last baby was born, and it was a year and a half old. We had to make its clothes do for the new arrival—she hadn't a stitch ready. Her sheets were the color of the floor, and that's saying a lot, and her night gown was a shade, several shades, worse. We got that off her and a clean working shirt of her husband's on instead before the doctor came, and our long obstetrical stockings—I think that the doctors must be more grateful for those stockings than for anything else we carry.

She hadn't any newspapers—yes, I said newspapers. I used to think like you that newspapers were printed to be read, but I know now that they are simply to be used as bed protectors by the Victorian Order.

Three-ply, run round with jumping stitches, and upholstered with the tail of a superannuated nightie. Sanitary and saves no end of washing. The oilcloth off the kitchen table is a good idea, too, but Mrs. Gray, that was her highly appropriate name, hadn't even the table, let alone the oilcloth, but we borrowed a bundle of "Delineators" from the neighbor who had phoned, and a pail with a rag stuffed in the place where it leaked, and our own basin for the scissors and string, a preserving kettle and a glorified soup plate for surgical basins. We did nicely, and she had a beautiful baby—those shiftless people always seem to.

We had her all fixed up snugly and the baby bathed, and were out of the house in just an hour; we had to consider the next day's work, you know, and there is generally a sister or a mother-in-law, or a neighbor who has had ten and knows all about it, to keep an eye on the patient. Of course, if there is any risk of hemorrhage we stand by till it is safe to leave.

Next day we went back with sheets and pillow slips, towels and a couple of night gowns for her—the husband was demanding his other shirt—and an outfit for the baby, and when we had bathed her and combed her hair and made the bed, her own husband wouldn't have known her, or the place.

There were only three rooms in the shack and six other kiddies, and you can imagine the bedroom—clothes and boots and headless dolls and jammy biscuits—we shot everything out. She got along beautifully as if she had been in a private ward at $30.00 a week.

The Friendly Aid put in a woman to run the house, and the obliging neighbor took the last baby but one with her, and the rest of the kiddies were parcelled out up and down the street, but they never missed me. It became my case after the first day, and the minute I hove in view with my case bag a shrill yell would come floating down the breeze: 'There's the trained nurse,' and they'd bear down on me in a gaining cohort and escort me to their mother's door, murmuring, 'The trained nurse!' estatically at intervals. I was certainly the romance of their young lives, 'the inspiration and the poet's dream,' so to speak."

"You must have been glad when you were through with that case," Sadie remarked.

"No, I wasn't—specially. It's awfully interesting to manage a transformation scene like that. That's the sort of place where the Order does its best work, you see. We managed to put a few ideas of cleanliness into her benighted mind. Of course most of the cases were different, lots of them were nice people with a bathroom and Pears soap for the baby, and all its things in a blue silk-lined basket, and so on.

Three obstetrics apiece in the forenoon is considered a good average morning's work, but it takes some hustling when you just miss the car you want three times out of four.

Then in the afternoon we generally do chronics—we haven't many of these; and burns and sprains and things like that, that aren't urgent, and child welfare and metropolitans."

"And what?" Sadie demanded, "What on earth are child welfares and metropolitans?"

"Child welfare means trotting 'round to see how our new babies are getting on, and if the mothers are helping them out with orange juice or onion soup. Bless you, that is one of our most important stunts; and metropolitans—"

"It sounds like stocks," Sadie interrupted, burrowing into her pillows, "but don't let me interrupt."

"Well, metropolitans are—you've heard of the big Metropolitan Life Assurance Company, American concern, but it is all over Canada, too, and some genius thought out the scheme of throwing the right to a free nursing service with each policy, free to the patient, but paid for, of course, by the company, and the Victorian Order does the said nursing, and I tell you it is great. Gives you a chance to remember what you know—or have forgotten; of course, the trained nurse never diagnoses; we've had that jammed into our heads often enough, and most of the times the Metropolitan calls only amount to a sore throat, or a tummy ache, or a cut finger. A salt and water gargle, a bit of vaseline and a bandage, or a dose of castor oil is all that is required, and often the mother would have seen the thing through herself only the agent of the company has happened in to collect the policy dues and says, 'Dear me! Tommy sick? Why don't you have one of our free nurses in to fix him up? I'll ring her up from the office and send her round this afternoon.' Of course the mother is charmed and her neighbors are duly impressed with the case bag and the thermometer; probably the agent rakes in several more policies as a result, and we collect 50 cents for the call, the only person not entirely happy is liable to be Tommy, who has to down the castor oil. If it's measles or whooping-cough, we back swiftly and gracefully to the door-step and finish taking the particulars there, as we don't nurse infectious diseases. But the sore throat is sometimes a bad go of tonsilitis and the tummy ache an appendicitis, and then you sit up and take notice, and there is always the chance of it. Not to mention the little operations done at home with the aid of the Victorian Order; you literally never know what the day will bring forth for you and that's the biggest charm of the whole thing. Why, I couldn't stand private work again at any price, stuck and anchored at one monotonous case week after week. In the Order you will average eight or nine calls a day, all over the city, and never a chance to get tired of any of them, with the unexpected always waiting for you 'round the corner, and the everlasting need to use your wits to improvise and smooth down and straighten out.

Then most of the patients and their friends regard you as something so jolly wonderful and learned that it makes you feel all humble and meek to yourself inside. And the brisk tramps where the cars don't run send you home with an appetite that you wouldn't sell at any price; and asleep before you've been five minutes in bed. Oh! it's great, Sadie,

it's great! The minute you are able to get busy again you've got to join. We will try and get appointed to a two-nurse district, and have a little cottage or a flat, and work together. How does that strike you?"

Sadie sat up, her eyes shining.

"I think—I think—it would be immense! Look here, when do you get off duty again? I hear Miss Clayton coming to turn you out."

"Day after to-morrow—evening."

"Then come back and tell more. Promise, or I will have a relapse."

"I promise," I said, and fled before Miss Clayton's uncompromising eye.

RENE NORCROSS.

Disabled Canadian Soldiers

What Is Being Done to Restore Their Ability—The Latest Statistics

The Military Hospitals Commission at Ottawa informs us that 2,081 soldiers were under its care at the beginning of this month. Of these, 426 were at Sanatoria for tuberculosis, and 1,616 at Convalescent Hospitals, 682 of the latter being out-patients—while 39 members of the force were in asylums for the insane. Of the 426 cases of tuberculosis, it may be added, almost exactly half were discovered in time to prevent them from leaving Canada for the seat of war.

According to a statement prepared by the Militia Department, up to October 5, 1916, the number of soldiers sent back to Canada because of medical unfitness was 6,208. Of these, 961 were suffering from wounds, shell-shock, or the effect of gas; 122 were insane; 245 were afflicted with tuberculosis while the remainder, 4,880, were suffering from other diseases and disabilities.

All Canadians ought to know what is being done by the Military Hospitals Commission, acting on behalf of the whole body of citizens, for the restoration of their wounded defenders to a position of self-support and independence.

Every disabled soldier is medically examined on arriving at Quebec. If he is no longer in need of hospital treatment, he is sent home free of expense and discharged with a pension or gratuity according to the extent of his disability.

If he needs further treatment, he is taken to the hospital or sanatorium where the treatment most suitable to his case is available, and, if possible, to the institution nearest his home. Men who cannot resume their former work on discharge from hospital are advised and enabled to take special training for new occupations. This is provided free of cost; and while the men are being trained the Dominion Government maintains them and their families.

Men needing artificial limbs are taken to Toronto, where these limbs are made and supplied without charge. Men with serious nerve disorders are treated specially in the Ontario Military Hospital at Coburg.

Each Provincial Government has appointed a Commisison to help discharged men in securing steady and remunerative work. The Dominion Government, and other authorities and employers, systematically give preference to returned soldiers when filling vacant positions.

The public can and should co-operate heartily in this urgently necessary work, by encouraging the men to take fullest advantage of the curative and educational opportunities given them, and afterwards by seeing that they get work. Local committees have been formed for this purpose in many towns, but much more has to be done in this way.

The treatment, most carefully carried out in accordance with the latest discoveries and the proved results of medical experience, includes many forms of strengthening exercises, often requiring special and costly apparatus; the scientific use of electricity, massage, and continuous baths for affected limbs; with wise dieting and fresh air as a matter of course.

Occupation is often as necessary and beneficial as rest itself, in its curative and strengthening effect on body and mind. Classes are therefore held at the hospitals, for instruction and practice in many arts and industries, such as carpentry and wood-carving, metal and leather working, typewriting and book-keeping, mechanical drawing and elementary engineering, gardening, bee-keeping and poultry-raising.

These all help to increase the capacity of the patients, and to lessen the effect of any injury they have received, by getting them into practice for such industries as they can profitably undertake. The medical and educational officers try first to discover what each man is most likely to succeed at, and then to fit him for it as thoroughly as possible.

It has been wisely decided that no man shall forfeit any part of his pension on account of his industry and enterprise in improving his own financial position.

Let our readers write without hesitation to the Secretary of the Military Hospitals Commission at Ottawa, or to the Provincial Commission at the Provincial capital, asking any further information they may desire, or giving practical suggestions resulting from thought or experience.

Inoculation against typhoid has produced a remarkable diminution of that disease amongst the French troops. In two months of 1915 there were 10,689 cases of typhoid reported from the army zone; in the corresponding period this year there were only 1,798 cases, and most of these were men who had refused inoculation.

Seventh Annual Report of the Nurses' Association of China

The seventh annual meeting of the Nurses' Association of China met in Shanghai August 30 to September 4, with an attendance of thirty-seven members. The hall of the China Inland Mission was kindly placed at the disposal of the Conference, and the thoughtful kindness of Miss Batty, and other ladies of the C. I. M., added much to the pleasure of the meetings.

Wednesday, 3 p. m.—Promptly at 3 p. m. the President, Miss Powell, took the chair, and the murmur of talk and greetings was silenced as she gave out the hymn, "Blest be the tie that binds." Dr. Beebe, of Shanghai, Secretary of the China Medical Association, led in prayer, and then gave a short address, taking as his text I Cor., 13. He did not choose this passage because he felt that nurses needed it more than others, but because their work gave them an unequalled opportunity of making evident the love here pictured. Nursing is love made manifest. The old commandment read, "Thou shalt love thy neighbor as thyself" Christ brought a new commandment, "That ye love one another as I have loved you."

He was followed by Mrs. George Fryer of the Institution for Chinese Blind, who welcomed the nurses to Shanghai, and outlined a very inviting programme of sightseeing. Miss Powell replied with thanks for the freedom of the city thus given, regretting that there was not a whole week in which to visit the many interesting places mentioned, and inviting the Conference to begin at once to take advantage of the opportunities thus offered. The members accordingly repaired to the lawn, where motors were waiting to carry them to Jessfield, the beautiful home of St. John's University of the American Episcopal Mission. Here tea was served by Miss Elwin and Mrs. Cooper and a delightful social hour spent on the spacious lawns and among the rare trees.

Thursday, 9.30 a. m.—12.—On Thursday morning the work of the Conference began in earnest. The subject which is of first importance to all nurses in China was ably treated by Miss Howard of Peking, in a paper on "The Nursing of Tubercular Patients." Miss Howard considered her subject under three heads:—

1. A comprehensive sketch of modern sanitorium treatment of tuberculosis.

2. A practical and thorough study of how far we may carry this out in our hospitals.

3. Plain setting forth of our duty as nurses in the lessening and prevention of this disease. This duty is three-fold:

(a) We do all we can by example and teaching to impress upon all

with whom we come in contact the benefits of sanitation, fresh air, and cleanliness.

(b) To give special teaching to our nurses.

(c) To introduce into our hospitals the most up-to-date methods we can secure.

In the discussion following, much help was interchanged as to the diet of tubercular patients. The Chinese do not care for, nor is it always possible to obtain our Western food, and the problem of giving nourishment is a real one. Bean curd milk, made by factories in some places; buffalo milk brought to the boil and the thick skin removed; goat's milk; mutton broth with bread; red bean broth with barley; all these were highly recommended. Each nurse was asked to hand to the President the name of an article of food which could be obtained in her locality, that this information might be incorporated in a Book on Dietetics. For carrying children into the open air, one hospital had a Bradford Frame sent out from home, and others made locally.

The second paper of the morning was on "The Responsibility of Student Nurses to Evangelistic Chinese Work," and was written by Miss Leybourn of Foochow. It was a very thoughtful and spiritual consideration of her theme, and an eager discussion and questioning followed, seeking to draw out the best plans for securing time for the pupil nurses to take their full share in this greater work of winning the sick under their care to Christ. Miss Leybourn emphasized that the duty of superintendents to their pupil nurses is two-fold; she must train them to be the evangels of good tidings and good health. She outlined one day's programme of work, showing how time is set aside for the teaching of patients, as well as for ward work and study. She urged the definite setting aside of this time, and the holding of it, no matter how busy, claiming that herein lies the secret of the training of the pupil nurse for evangelistic work. If it is not thus taught during her course, it is unlikely that the nurse will later develop into a strong evangelistic worker. Let the nurses learn that they are "saved to serve" and "taught to teach."

In the discussion the question was raised, "Shall we admit non-Christian girls as pupil nurses?" Miss Baldwin of Foochow, in a few earnest words, urged that only Christian girls be trained. "They represent us to the patients, our two-fold work must be theirs also." Miss Ogden told of one non-Christian nurse who had been converted during her training, had developed a strong Christian character, and done noble work; thus the two sides of the question were presented. The President summed up the discussion: "It is felt by the Association that Christian girls are to be preferred as pupil nurses, but experience has shown that when there are a few non-Christian among them, these usually decide for Christ, and may become efficient workers.

Adjournment was made for tiffin, the nurses feeling that a very profitable morning had been spent.

4.30—6 p. m.—At 4.30 Conference reassembled, the Chinese men and women nurses of Shanghai also being present. The front of the hall was hung with uniforms from various schools, and these were later examined and discussed. The session opened by the singing in Chinese of the hymn, "He leadeth me," and by prayer. Chinese was used throughout the session. Miss Clark of the Shantung Road Hospital, Shanghai, gave the address of the afternoon; it was one of the most important addresses of the whole Conference. She said in part: "The time has come in China when girls as well as boys have the opportunity of choosing a profession, and of doing something for their country. China needs great teachers, righteous officials, honest business men, but how much she also needs true, unselfish men and women to nurse, and to show others how to nurse her sick!"

"The Nurses' Association of China, what does it mean? It means we are banded together to raise the standard of nursing and training of nurses here in China, and to help one another in times of illness, discouragement or misfortune. You are called 'Hu-sheng," (pupil nurse) and 'Hu-shi,' (graduate nurse). What do these titles mean? The dictionary tells us 'Hu' means to protect, aid, succour; 'shong,' learning the art; 'shi,' have learnt the art, and should be ready to teach others. To protect, aid, succour, this for you has a three-fold meaning:

1. To protect and aid your patients. You think of their sickness first, but a good nurse sees deeper and thinks of the sadness and hopelessness of their lives, often the very root of their trouble. Avoid thinking of them as so many 'cases.' You have a great message of love, the opportunity is great, but quickly passes; let us teach Christ as we have opportunity, let us *live* Him every day and so bring His hope and joy into sad lives.

2. To protect and aid yourselves. Your body by means of careful diet, cleanliness, and carefulness in contact with disease; your mind and heart by helpful reading; pure talk; avoid grumbling; protect yourselves from littleness.

3. To protect and aid the Profession. We are in our young days, and the reputation of the Profession is in your hands. We have loved it, and pass on the honour and privilege to you. The difficulties are many, each nurse needs the Heavenly Pilot to guide and direct them."

Friday, 9.30—12.—Friday morning was warm, but the nurses gathered with unabated enthusiasm, and in opening the Session sang Luther's hymn, "A Safe Stronghold our God is Still." The President said: "This hymn, every word of it, is for nurses." The papers and discussion of the morning dealt with the nursing of lepers and insane. Miss Tsay read a well-written paper, "Work among lepers," telling how the work is carried on in Dr. Main's Hospital. She said: "Segregate and keep the patients clean and sanitary, and the fight is half won." The nursing in this Hospital is simple, because the patients help one another, except when attacks of leprous fever come on and special nursing must be given.

In the routine work of the institution the lepers also take part, and there is a spirit of kindness and helpfulness throughout. In the Phillipines, chaulmoogra oil, camphor and resorcin have been used with good results, and Dr. Main has also tried Nastin, Samoin, and Lapraline, which produce temporary improvement in others. Patients usually show initial improvement by reason of better surroundings. Out of forty inmates, two were Christians when admitted, and all the others but seven have been baptized.

Mrs. Fowler sent a paper telling of their interesting seventeen years' work in Siaokan, Hupeh. She sketched the growth and the development of the Institution, from the twenty patients in the unsanitary surroundings, which she and Dr. Fowler found on arrival, to the comfortable refuge now provided for the one hundred and sixty lepers under their care. She described the same helpful spirit Miss Tsay had noted, and said it is a touching sight to see a blind leper wheeling a lame man in a chair, the lame man directing the way. In pointing out the Way of Life, they also help one another. The inmates are divided into groups of four, one Christian leper teaching three others.

In the consideration of the care of the insane Mrs. Fryer gave an account of the work of Dr. Sheldon, of Canton. His patients are all housed on the ground floor, and no restraints used. For violent patients an iron cage is fitted over the bed and fastened securely; cold water baths are found beneficial. The aim of the institution is to suit the treatment to individual cases, and allowing each, as nearly as possible, to follow his own bent; thus, one who imagined herself a queen had a throne in her room; another who constantly bowed to people was allowed to stay at the gate-house. The patients have free access to the grounds, watchmen being placed at each gate.

The discussion which followed brought out the facts that in Shanghai is a refuge for the Insane supported entirely by the Chinese, and directed by Dr. Chalmers; also home for the aged, blind, lame and lepers, cared for by the French Sisters, but supported by the Chinese. In Soochow Dr. Wilkinson gives the ground floor of his Women's Hospital to insane women, taking only hopeful cases. The great need of this work was shown when it was mentioned that there is an average of one insane in every family in China, and the great majority are uncared for and unprotected. The President suggested that a chapter on the nursing of the insane be incorporated in a text book on nursing. Mrs. Fryer was appointed chairman of a committee of three, to prepare a pamphlet on the proper care of the insane, and to secure the publishing of it in newspapers and magazines.

Conference adjourned for tiffin.

3—4.30 p. m.—On Friday afternoon Miss Hood of Soochow, read a paper which opened a very practical discussion. Her subject was: "Shall we use Ward Maids and Orderlies?" The discussion emphasized the facts which Miss Hood herself brought out, Chinese girls look upon

many things which come into the nursing work as beneath their dignity. We must make it plain that all work for the patient's comfort is nursing, and that a superintendent does not ask her nurses to do anything she has not done, and would not do. On the other hand, the young Chinese girl is not accustomed to heavy physical work, and much of the cleaning may well be taken off her hands, leaving more time for the care of the sick, and for study and teaching. She must be so trained that she will command the respect of her own people among whom she will go, and uphold the dignity of her profession. In hospitals doing a heavy accident service the young nurses cannot do the heavy lifting, and older women (amahs) must be in the wards to help. It is well to define clearly, in writing, the duties of both nurses and amahs, to avoid misunderstanding and leave no excuse for work undone.

This discussion was followed by a paper on "The Nursing of Chinese Children," by Miss Chisholm, of St. Luke's Hospital, Shanghai. In teaching emphasise the importance of observation of symptoms; the significance of elimination, and the care of the nervous system of the little child in cold baths, etc., and the need of watchfulness in fracture cases to prevent restlessness. Chinese food is lacking in lime products, study the question of nourishment.

The discussion of this question turned on two points, first, the feeding of the sick child, and second, the wisdom and practicability of allowing friends to stay with him. Regarding the first, a thin porridge of rice, millet, etc., cooked for six hours and flavoured with salt, sugar, or with a raw egg beaten in; fish broth; emulsion of rice husks and cinnamon; red beans and barley broth; buffalo milk boiled and skin removed; were all mentioned as having good food value. Regarding friends, the suggestions were: Allow nursing mothers to stay; let friends pay for a room and conform to Hospital regulations; let them stay near by, and see how the child is cared for, and then they will be satisfied. Children are more easily managed if the mother is not at hand, if very ill, it is a great help and comfort to have the mother present.

8.—10 p. m.—On Friday evening the Shanghai Medical Association met with the Nurses' Association, the programme opening pleasantly with a discussion of the delicious coffee and ice cream provided. The social hour over, Dr. Garner of the Margaret Williamson Hospital, Shanghai, took the chair, and with gracious dignity presided over the meeting. Miss Gage of Anking read Miss Tomlinson's paper on "The Nurse's position in Hospitals in China; administratively and executively," and in the discussion that followed Dr. Main of Hangchow, Dr. Bryan of Shanghai, Miss Clark, Miss Chisholm, Miss Powell and others took part.

Saturday, 9.30—12.—On Saturday Mrs. Burnip, L. M. S., Shanghai, kindly gave an account of "Midwifery in a district in Central China," this being an account of work she had previously done at Hankow. She said the difficulties were experienced on account of the unwillingness

of young Chinese ladies to do this work; this was overcome by allowing only the seniors to do it, thus putting a premium on the work. Another difficulty was to make the nurses realize the need for haste. A list of four names, the first two to be ready at a moment's notice, and a fine imposed for lateness, solved this trouble. Tin cases were made and used instead of leather bags; hot and cold boiled water, basins, etc., were carried, the nurses wore coloured uniforms, white conveying to the Chinese mind the idea of death. Two nurses went together, with a foreign lady accompanying them; and either while waiting or else after the birth of the child, an opportunity was made to speak to the people of Christ. At such times the homes are full of friends and neighbors, thus affording a good opportunity for preaching the Gospel. Later, when the Chinese nurses were qualified to go alone, Mrs. Burnip often paid a surprise visit to them at their work, and never were they found failing in their duty. Many were the experiences, some sad, some humorous, met with in the work which gives so great an opportunity for evangelistic effort.

The discussion which followed brought out the interesting fact that in Peking there is a municipal law to the effect that if a woman is in labor more than twenty-four hours, the case must be reported to the nearest physician. The Methodist Hospital helps enforce this by doing free obstetrical work; advertising largely that all patients who come and register and are examined, will be treated free, if necessary.

The Question Drawer occupied the closing hour of the morning, the Secretary reading the questions, and answers being drawn out by discussion.

Q. Is there a standard of education required for pupils entering registered training schools? A. No. Some schools aim at accepting only High School graduates, but most schools are unable to maintain such a high standard. Many girls of inferior education make excellent nurses. Each superintendent must decide as to the fitness of the applicant.

Q. Should pupil nurses of registered training schools take the N. A. C. examination before receiving their own school diploma? A. On motion of Miss Ogden, seconded by Miss Chisholm, it was decided that all schools registered under the N. A. C. grant their diplomas only after their pupil nurses have received the N. A. C. diploma.

(In connection with this motion, it was moved by Miss Clark, and carried, that the date of special registration for nurses unable to write, but able to pass an oral examination of the N. A. C., be extended from 1916 to 1918. See page 8 of constitution.)

Q. Will Chinese nurses passing the N. A. C. examination be received on the same footing as foreign nurses? A. Yes.

Q. Should the Rockefeller Foundation Scholarship be given to nurses who are unknown to, or not recommended by, the N. A. C.?

A. The Secretary was instructed to write to the Rockefeller Foundation asking that this Scholarship be given to nurses recommended by the N. A. C., or holding the diploma of the N. A. C.

Q. Should we use women nurses for men patients? A. The N. A. C. feels that the time has not yet come when women nurses should be freely used in General Hospitals. Do not let us hurry that time lest there be danger of setting back much that has been accomplished. If the Chinese introduce it in their own hospitals, it will come more gradually and naturally.

On Saturday afternoon many of the nurses, at Mr. and Mrs. Fryer's kind invitation, motored out to the Institute for the Chinese blind, and there saw the touching and altogether delightful exhibition of music, reading, writing, basket making and drill, and also inspected the home and class rooms of the boys. Mrs. Fryer served tea, and we returned in the cool of the evening, and will carry long the memory of this work of love, which must be so near to the heart of the Master.

The visiting of the different hospitals in Shanghai, the Commercial Press, the schools, was all interesting and instructive, and warm appreciation was expressed for the kindness of the many who in this way made themselves our hostesses, and made the week so delightful.

Monday, 9—12.—After a quiet Sunday, welcome after the busy week, Conference met on Monday morning for the annual business meeting. The session opened with thirty members present. After the singing of a hymn and prayer, the minutes of the annual business meeting of 1915 were read and adopted. Miss Clark called attention to the resolution "That the Nurses' Association of China hold this Conference every two years instead of annually. Beginning China New Year, 1918," which had been omitted from the report. The names of the new members, thirty-seven in number, were read and duly received, and eight training schools registered under the N. A. C.

The General Secretary then gave a short report of the year's work.

The Treasurer gave her report and presented the balance sheet, audited, and showing a balance of $54.14.

A letter was read from the Editorial Secretary, who is absent on furlough, and a strong plea made that our pages in the Medical Journal be handed over and a small monthly paper for the N. A. C. take its place. Dr. Merrins had been waited upon in reference to this matter, and had kindly offered to attend and make a statement. The President then called upon Dr. Merrins, who was present, to come forward. He told us three courses were open to us regarding the disposition of the matter contributed by the N. A. C.

1. After the Book Reviews.

2. Before the Correspondence. These would demand a certain amount of control in respect of matter submitted.

3. At the end of the Journal and full control exercized by the Editorial Secertary.

After discussion by the Conference it was moved by Miss Chisholm, seconded by Miss Clark, that we select the pages at the end of the Journal. Carried.

Dr. Merrins was thanked for his courtesy and retired.

The Assistant Secretary reported that four men and four women from three different schools took the examinations this year, and on the whole did well, a great improvement on last year in the quality of work done. One failed in the practical, and was recommended to try next year.

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Resolved that: "The next Conference be held in Foochow during Chinese New Year, 1918."

This ended the work of the morning, and Miss Powell, in declaring the Conference closed, gave in a few earnest words a message which had been a help and inspiration to herself during the last year. "Be ye imitators of God," was the thought she wished the nurses to carry with them. "Imitators," a word with a deeper, closer meaning than "followers." As we separate to go our several ways, may we keep this ever before us, endeavoring in all things to be like God, imitators of Him. Each heart echoed the petition of the closing prayer, led by Miss Baldwin, for God's grace to enable us to follow the steps of our Great Leader, and so obtain the highest possible results of our work.

OFFICERS

President, Miss Alice Powell, R. N., M. E. M., Peking; Vice-President, Miss M. E. Balwin, C. M. S., Foochow; Treasurer, Miss E. Stuart Chisholm, R. N., A. C. M., Shanghai; General Secretary, Miss L. A. Batty, C. I. M., Shanghai; Assistant Secretary, Miss M. R. Ogden, R. N., A. C. M., Anking; Editorial Secretary, Deaconess Laura Wells, R. N., A. C. M., Shanghai.

Registration Committee—Mrs. G. B. Fryer, R. N., 4 Edinburgh Road, Shanghai; Miss Eva Gregg, R. N., M. E. M., Tientsin; Miss Florence Sales, R. N., M. E. M., Chinkiang; Miss E. G. Dexter, R. N., A. C. M., Wuchang; Mrs. Bayard Lyon, Peiyang University, Tientsin; Mrs. Chui, 129 Bubbling Well Road, Shanghai; Mrs. Ts'en, A. C. M., Hankow.

From Boston comes the news that making up Christmas bags for Canadian soldiers in France is now one of the absorbing occupations to which the Canadian members of the Boston Nurses' Club are devoting all their time. In each bag the girls are planning to put small packages of tobacco and cigarettes, tooth brushes, tooth paste, playing cards, leather shoe laces, handkerchiefs, small puzzles, writing paper, wash cloths.—Evening Telegram.

Editorial

In sending this, our first Christmas issue since the C. N. A. bought this magazine, to the many owners of it, we wish all Christmas Greetings. So many of them are away on foreign service, thinking as all will of their homes and friends. May they all feel the Christmas wishes sent by those who, by reason of some real obligation, or lack of health, must stay at home and do the "duty that lies nearest." So many associations are remembering their sisters overseas with generous parcels, or, as in the case of the Manitoba Graduate Nurses' Association, with a monthly remembrance in the shape of a year's subscription to "their own" magazine.

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In our Letter Box will be found a letter from Miss Batty, Secretary of the Chinese Nurses' Association; and elsewhere is the report of their Convention, held in October last. Her enquiry as to registration qualifications should bring her an answer from some of our nurses interested in getting a Registration Bill that will register all nurses in Canada, with suitable qualifications and with full reciprocity between province and province.

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May I ask all subscribers not to renew through agents. Their commission is so large, that we get very little from the money sent, and I am sure each nurse must realize by this time just what each dollar means to the "Canadian Nurse," and will wish to turn it all in to the office.

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Renewal slips are being sent out to each nurse before her subscription falls due. Those due in August, September and November were all sent in late, due to lack of time on the Editor's part. It will help matters very much if those receiving these slips will return them as soon as possible with the money, as the revised mailing sheet for the month has to go in early.

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The Editor's thanks are due to the nurses who so kindly sent the September issue as asked for. Will they all please take this notice personally, for there is so much absolutely necessary writing and bookkeeping to be done that she fears the delay in thanking them by letter would be great. Her thanks are also due to many subscribers who have written expressing appreciation of the step the C. N. A. has taken, and of the difficulties in the path.

The following notice has been sent to this office by the "Pacific Coast Journal of Nursing" with a request to publish it:

FOUND

A Hospital Pin has been turned in to the California State Nurses' Association which was found at the Exposition last year. The owner may have the pin by applying to Mrs. J. H. Taylor, R. N., 2375 Jackson Street, or to "The Pacific Coast Journal of Nursing," 721 Call Building, San Francisco. The pin is about the size and shape of a 50-cent piece, and is made of gold with a red enamel rim in which appears the words: "Training School for Nurses, Sanitas." On the back of the pin is engraved, "M. May McDonald, July, 1906." Nursing journals please copy.

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Subscriptions are still being needed badly. Some nurses are working very hard, others hardly seem to realize our great present need. The Editor thinks and dreams of little else but subscriptions, and came across the following recently: "Apropos of W. G. Wells' association with W. E. Henley, he tells an amusing although somewhat pathetic little story. The new 'Review' was not exactly a successful production, and one day Mr. Wells and Mr. Henley were in the office discussing its prospects when a funeral went by in the street. Henley looked out of the window and regarded the cortege for a moment in silence. Then he turned to his companion and said, with a worried frown: 'Can that be our subscriber?' "—Argonaut.

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The new subscriptions that have come in during the past month are as follows: Alberta, 16; British Columbia, 21; Ontario, 4; Nova Scotia, 8; Manitoba, 54; Quebec, 2; Saskatchewan, 3; U. S. A., 6. These figures speak for themselves and show very plainly just how much canvassing will have to be done to get results. If each nurse who subscribes would interest her friends the improvement in our finances would soon show.

Cradle of Jacques Cartier

A touching letter of thanks from a poor hospital in a far away corner of Brittany has been received by the Toronto General Hospital in gratitude for surgical supplies sent through the Secours National. It is from a quiet little town of Parame, not far from St. Malo, and is written by Jeanne Lambert, "Infirmiere Major," and relates that the nurses and wounded in this remote hospital are touched—profoundly touched—by the generosity of their Canadian friends. "We beg our benefactors in Toronto to accept the fraternal gratitude which flows to them from the cradle of Jacques Cartier. Vive le Canada!"—Evening Telegram.

Under the auspices of the local association of the Victorian Order of Nurses for Canada, a baby contest was held in Ottawa, October 4th, 5th, 6th and 7th. These contests have been held before in different parts of Canada, but this is the first undertaking of the kind in this city, but judged by the smoothness with which everything went off no one would have guessed it to be Ottawa's first.

There were over three hundred entries, before the list closed, and if the parents had been a bit more wide awake, and more in the habit of reading their newspapers, the entries would have been well over six hundred, as many belated requests came in "To open the list, just for *my* baby," but this could not be done. These parents will understand it better next year. In connection with the contest, an excellent Child Welfare Exhibit was held, and the mothers visited this after taking their babies to be examined. This examination was held in Racquet Court, "a most appropriate place," as our Mayor remarked in his speech which preceded the presentation of prizes. As some of the mothers were obliged to leave home so early, and would be late in getting back home, delicious refreshments, tea, coffee, sandwiches and cake were served from 10 a. m. until 5.30 p. m., a very thoughtful provision on the part of the committee, and much appreciated by the mothers.

While the writer was fully aware that Ottawa is noted for her great number of babies, she was not prepared to see so many really beautiful and almost perfect little specimens of babyhood. They howled lustily (and who could blame them?) when they were being subjected to the various "tests" which these little ones evidently looked upon as nothing short of gross insults to their little majesties.

Among the number of embryo citizens presented for competition, were eight pairs of twins, and one set of triplets, Now, twins are very common sights in Ottawa, but the triplets were a great curiosity, and one heard from all parts of the Court, "Please don't let those triplets get out of here until I have seen them," and needless to say, the fond mother

was only too proud to have them displayed to the admiring crowd that gathered around the tiny mites. These triplets were given the King's Bounty. When they are old enough to understand what it was all about, they will doubtless feel very proud of themselves for having been born triplets! The prizes were presented on the last day of the Contest, at City Hall, by the Mayor, and while, of course, there were many disappointed mothers, they were all very nice and hid their disappointment in their interest in the fortunate babies. During the three days of the physical examination of the babies, all helpers were as busy as could be, and the nurses of the city, who were not otherwise engaged at the time, gave very valuable assistance. The District Superintendent of Ottawa, was indefatigable in her zeal to make this first Baby Contest an affair to be remembered with pleasure and benefit to the mothers of Ottawa, and success most certainly crowned her efforts.

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The Victorian Order of Nurses for Canada offers a post-graduate course in district nursing and social service work. The course takes four months, and may be taken at one of the training homes of the Order: Toronto, Ottawa, Montreal, Vancouver. For full information apply to the Chief Superintendent, 578 Somerset Street, Ottawa, or to one of the District Superintendents, at 281 Sherbourne Street, Toronto, Ont.; 46 Bishop Street, Montreal, Que.; or 1300 Venables Street, Vancouver, British Columbia.

The Canadian Nurses' Association and Register for Graduate Nurses, Montreal

President—Miss Phillips, 750 St. Urbain Street.
First Vice-President—Miss Colley, 261 Melville Avenue, Westmount.
Second Vice-President—Miss Dunlop, 209 Stanley Street.
Secretary-Treasurer—Miss DesBrisay, 638a Dorchester St. West.
Registrar—Mrs. Burch, 175 Mansfield Street.
Reading Room—The Club Room, 638a Dorchester Street West.

The monthly meeting of the Canadian Nurses' Association was held in the Club House on Tuesday evening, November 7th, when Mrs. Reid delivered a most interesting illustrated lecture on her work in Central Africa. The pictures were excellent and gave one a very good idea of

the manners and customs of the natives, their homes, and the means of travelling when Mrs. Reid worked among them. There journeys of 300 miles were accomplished by means of a hammock slung on a pole and carried by two natives on their shoulders or heads. Now they have railways in that part of the country and a journey which then took two weeks to make can now be covered in one day and a half.

The women work in the fields, and the men do the sewing. When a young man becomes engaged he makes his promised wife a very fine jacket. While the woman is hoeing, the baby is on her back, and after a hard day's work she goes home to prepare the evening meal.

Mrs. Reid lived and worked among them for ten years and her six children were all born there. Though she has been home for some years she still hears from some of them, and it must be a great satisfaction to know how wonderfully they have developed. She spoke very highly of the work of a nurse, who was one time night superintendent of the Toronto General Hospital.

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NOTES

The Canadian Nurses' Association took charge of a booth at the Military Benefit held in the Arena in October, and received many valuable donations from friends, which aided very materially in the success of the sale. Total receipts amounted to nearly $500.

The work of the Edith Cavell Chapter is very encouraging. Many packages of dressings, pads, bandages, socks, caps etc.. having been sent to the front. Last year one of the classes in the Royal Victoria Hospital undertook to supply five prisoners of war with food for six months. This has been continued by the Chapter and cards have been received from some of them every week acknowledging recipt of packages.

We regret to hear that Mrs. Sherman is ill again. Also that Miss M. McBride was thrown from a motor last week and sustained injuries to face and head.

HELEN A. DESBRISAY, Sec.-Treas.

Dr. R. M. Starrett, many years associated with the advertising of Antiphlogistine, sends greetings to his many friends, announcing his resignation as Advertising Manager of the Denver Chemical Manufacturing Co., effective January 1st.

A cablegram was recently received at Baltimore from Sir William Osler of Oxford University announcing the death of Miss Luisa Parsons, trained nurse, who studied under Florence Nightingale, and was one of the founders of John Hopkins Hospital. She also opened the University of Maryland Hospital here. Miss Parsons accompanied Lord Wolseley's Egyptian Expedition in 1882, receiving decorations from the Khedive of Egypt and Queen Victoria.

The Nurse's Library

THE CONTROL OF HUNGER IN HEALTH AND DISEASE

(By Anton Julius Carlson, Professor of Physiology in the University of Chicago, published by the University of Chicago Press. Price $2.00 net.

This most important branch of scientific medical research has been rather neglected in comparison with other fields of knowledge, and is as the author states, "to be considered as the first rather than the final chapter on hunger control, and yet the most extensive work in this field to date." A very interesting though necessarily technical book in which the analysis of hunger points the way to solving the problem of hunger control—to the great help of the medical man who now, as the author says, "When hunger becomes pathologically exaggerated, knows no remedy; when it fails in disease he dispenses the 'bitter herb' of tradition—and hopes for the best."

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"Questions and Answers on Home Nursing," by Martin. Sixth edition, edited by Leonard S. Barnes 1/6 net. Bailliere, Trindall & Co., London.

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Examination of voice defects following adenoid and tonsil operations —Studies in speech disorder No. 4—By Walter B. Swift, M. D., Harvard Medical School, Boston, Mass. The Boston Medical and Surgical Journal, November 18, 1915: Summary: Operations for adenoids and tonsils often fail to relieve habits of faulty articulation and consequent school retardation. Vocal drill by one trained scientifically in speech disorder is the surest method to secure speedy permanent relief, in that perfect articulation that makes possible an easy enjoyable conversation.

Some developmental psychology in lower animals and in man and its contribution to certain theories of adult mental tests. Summary: I have tried to show that all these related theories serve in the formulation of exhausive tabulations of mental tests which should cover the entire life with all of its variations. Mental tests should relate all sensorial content, all interpretative reaction, all forms of collaboration, all controlled methods of expressive output according to the correlations laid down in the theory of the whole and the parts. It should be kept in mind that these are dominated in the different life periods by sense, affection, will and intellect respectively, each of which is relegated in succession to its subordinate place. These should be related in such a way as to picture the past, present and future of all possible mental types in their perfected devel-

opment and the percentage relationship should be shown between the present individual and his final, ultimate, developmental perfection.

The management of the speech defect problem in the public schools. Summary: In brief, the management of the speech defect problem in the public schools demands a medical speech inspector to see all pupils and assign them to either a phonetic, stuttering, or a special class, and to have at the head of each of these divisions a teacher specially trained in one of these lines alone.

Cheer *versus* Fear

Few persons realize the baneful effects of fear on the delicate organs of a patient. With each fear thought, a wave of contraction passes over the entire system. The contraction greatly increases the labor of the heart and thereby adds a burden that should be avoided at all hazards. A cheerful, hopeful manner will greatly aid the processes of healing the diseased or affected portions of the body, hence no opportunity should be lost in trying to keep the patient in as bright a mental state as possible.

A fund of humorous stories is an excellent asset for anyone who is obliged to be around where there is illness, and whenever the condition will warrant a little pleasantry, it should be available.

A convalescent often feels that he is shut off from the great world of knowledge and doings of the outside, but he is often impressed with the apparent emptiness of those who attend him. No doubt this is due to the fear of appearing dogmatic or of arousing an argument, which is certainly to be avoided. However, an interest in the doings and a general fund of information concerning the commuity are greatly to be desired.

MARY IMUS.

Cavell Crime Repeated

When the details of the shooting of Mme. Heloise Moresse become known, the world will find the case is a parallel to that of Miss Edith Cavell, according to Vie Feminine, which reports the death of the patriotic Frenchwoman, executed in Brussels.

Mme. Moresse was the wife of a Belgian journalist. When the war began she remained with him. Her relatives last heard directly from her in January, 1915, but recently a merchant in Amsterdam wrote to them, saying she died "tragically," February 29th, 1916, "the victim of her ardent patriotism." Confirmation has been obtained of the report that she was shot by the Germans. Mme. Moresse was 40 years old, and a nurse.—Evening Telegram, Toronto.

Letters to The Editor

Dear Editor:

The enclosed is from the "Nursing Times." It may be of interest to readers of the "Canadian Nurse." Both are called "Midwives."

A SUBSCRIBER.

AN INTERESTING CASE IN RUSSIA

Our correspondent who is nursing in Vilna sends us the following account of an interesting case:

"The most brilliant nurse in our hospital is also the most run-after midwife in select Polish circles, so that she had to leave us a few weeks ago to take an important case near Warsaw. On her return she told me (through an interpreter) of an unexpected experience she went through. Towards the end of her time with her patient there came an urgent message imploring her to go to the help of a case in the country, half a day's journey from Warsaw. So much surgical attendance had been drained to the front that maternity cases in outlying and distant country places are suffering greatly for want of assistance. The message given the midwife was that the child's hand had come down. Sister Konizka took with her a young military doctor who knew little about midwifery and possessed no delivery forceps; but he promised to help her as much as he could—even to doing Cæsarian section. They travelled the best part of the night. On arival, to their horror, they found that the 'handy woman' (of whom there must be an appalling lot in Russia) had pulled off the arm of the child in her effotrs to effect a delivery, and there were no signs of maceration. The midwife found the poor woman in tonic contractions and on the verge of collapse. While the doctor administered an anæsthetic, Sister quickly prepared the woman, scrubbed up her hands and arms, rinsed them well in spirits of wine, and then soaked them with a strong solution of iodine, specially between the fingers. Covering also the whole of her right arm with iodine, she prepared to turn the child, and pushing up the shoulder from which the arm had been torn, she followed down the body and secured the feet. Drawing these down and rotating the occiput behind the symphysis she used jaw traction to flex the head with the fingers of her left hand, while the doctor pressed over the pubic bones from above. After strenuous exertions on her part, Sister Konizka was able to draw the head through the contracted pelvis, and quickly cleared out all the contents of the uterus. The delivery was completed within an hour of their arrival. The reaction of her exertions was so great that Sister Konizka's arms trembled violently for some minutes after she had finished. The mother did well.

"In three days there was hardly a trace of the iodine stain on Sister's hands: it is a favorite way of hers to iodine her hands when assisting the surgeons at a serious operation. Our routine in the Vilna Town Hall Hospital is to rinse our hands and arms well with alcohol after thoroughly scrubbing with soap and water before soaking in perchloride of mercury solution."

* * * *

THE MIDWIFE QUESTION

I should like to add a word to Miss Hutley's letter in defence of midwives in the October number of the "Canadian Nurse." If every mother in Canada is, or can be, attended by a medical man, then there is no need of midwives, only of nurses, for the doctor does not give his patient the nursing care which she needs. But is this so? And if it is so in the cities, how about the country places where doctors are few and far between. I think Canada has no midwives, that is, women specially trained for this work as they are in England. Are not the Canadian women who, by doing midwifery (so offensive to the nursing profession), nurses only, trained to do the nursing when a doctor is in attendance and have taken up this work on their own account and are a law unto themselves, while the English midwives are governed by the very strict laws of the Central Midwives' Board and are under very strict supervision.

Then again they are only allowed to undertake the conduct of normal cases; they are taught to recognize the abnormal at an early stage and having recognized such a condition they are obliged, under a severe penalty, to call in a doctor.

Does not the choice for a woman in Canada often lie between the doctor that she cannot afford to have, or who is too far away to be summoned, and a woman with no knowledge either of nursing or midwifery? In England, as Miss Hutley says, the law forbids any untrained woman acting as a midwife. Is it not better so? Is it not better to have women trained in surgical cleanliness and perfectly competent to conduct an ordinary straightforward labor, and recognize the abnormal as something she must not interfere with, than to leave mothers trusting to a woman ignorant of the first principles of asepsis who would not hesitate to put her unwashed hand into the uterus, or pull on the cord in her efforts to extract the placenta until the uterus is turned inside out?

These are not fancy pictures, but real happenings. No midwife in England would dare do such. They are well trained and strictly supervised, and the distinction between normal and abnormal cases defines the work of the midwife as distinct from that of the doctor.

I think there must be hundreds of women in Canada away in the sparsely settled districts who are unable to get a doctor for their confinements, to whom the properly trained midwife would be a blessing.

S. M.

China Inland Mission,
Shanghai, November 3, 1916.

Editor "Canadian Nurse:"

I am enclosing you a copy of the report of our Nurses' Conference held in Shanghai from August 30th to September 4th. It is only the condensed report, but it may be of interest to you or your readers. We had the hottest weather of the summer during our session, but it only seemed to increase the interest and enthusiasm of the nurses present. I am wondering if we are any nearer registration in Canada. Would it be possible and practicable in some future issue of our "Canadian Nurse" to give the requirements of registration, I mean for graduate nurses? There have been some inquiries concerning it in the mission field—just a short notice of information.

Very sincerely yours,

LEILA A. BATTY.

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Seaforth, Ont.,
November 27, 1916.

Dear Editor:

The other day I read a conundrum, "Why is that face like Browning's poems? It has hard lines in it." Now, instead of the word "face," put "The Canadian Nurse" and read as before. It is rather hard sometimes to be told the exact truth, but although I am not a very old nurse, at least long in the profession, it has been a pleasure and delight to read the "Canadian Nurse" magazine almost monthly since I graduated. But you never knew it. It is looked for like an old friend, month by month. I treasure the copies, but as you have requested that some who were willing to part with the September number to mail it to you, I shall do so gladly. I re-read it all again.

How that paper written by Mrs. Moody on Pioneer Nursing in Alberta touched my heart. It has been my opportunity to train in a similar hospital on the Skeena River in Northern British Columbia, where we did not have night nurses, and when we had to watch and sleep at the same time, but when cases were not too serious, to rest as much as possible.

We—the medical superintendent, the lady superintendent and myself, nurse-in-training—were the pioneer workers in medical and hospital work in Northern Interior British Columbia, and it is with perfect sympathy and understanding that I have read Mrs. Moody's paper. If I could write a story like Mrs. Moody I should gladly do so, telling of some of our pioneer experiences in Northern British Columbia. I am thankful for the "Canadian Nurse."

The "New Idea" department attracted my attention. This may not be a brand-new idea, but it is a handy, easy plan. When called suddenly to a confinement case, it is so easy to prepare bed-protective pads

by taking several thicknesses of newspaper (brown paper would be better) covering one side with white cotton (partially worn sheets are fine). Let the cotton overlap edges of paper and baste edges on under side of paper. This can be ironed with a hot iron before using for patient. It might be useful in other cases.

A PIONEER NURSE.

School of Massage, The Toronto Orthopedic Hospital

Founded 1899

Only School in Canada. Weir-Mitchell System. Swedish Movements. Lectures in Anatomy and Physiology. Male and Female Pupils accepted.

Terms on application to Superintendent,

100 BLOOR STREET WEST - TORONTO, ONT.

The New York Nursery and Child's Hospital

Sixty-first Street and Amsterdam Avenue, New York City

OFFERS to graduates of recognized training schools a splendid post graduate course of three months in obstetrical nursing.

This course includes experience in modern methods in the hospital wards and private floors and in the obstetric department among the city poor.

Weekly lectures, classes and demonstrations are given together with a proposed series of evening lectures, or talks, to nurses and patients on pre-natal influences and the after care of mother and child, on hygiene and sanitation, and other instructive and interesting topics.

A three months' post graduate course in pediatrics is also offered to graduate nurses who desire special preparation in the care of children.

This course will include experience in the children's wards, including the observation ward, the babies' clinic, instruction in the "boarding out system," etc., the instruction given in the diet kitchen in connection with these courses will be optional with graduate nurses.

The hospital is now ready for affiliation with accredited training schools who desire for their pupils special training in obstetrical nursing or an unusual opportunity for experience in the care of children, including instruction in the diet kitchen in the preparation of formulae and special diets for children.

The course for each service is three months, or six months where the two services are combined. Classes, lectures and demonstrations as enumerated above, will be held regularly.

Comfortable housing conditions, with a desirable environment for young women in training are provided.

For further information apply to

MISS RYE MORLEY, Superintendent.

Hospitals and Nurses

NEWFOUNDLAND

The annual meeting of the Newfoundland Nurses' Association was held in October. The following officers were elected: President, Miss M. Southcott, 29 King's Bridge Road; Vice-President, Miss Taylor, lady superintendent General Hospital; Secretary-Treasurer, Mrs. Hiscock, 143 Grove Street. Several members have gone across for war work since the last annual meeting; they are: Miss Gardner, graduate of General Hospital, St. John's, now at Lord Roberts Hospital, Brighton; Miss Tulk, graduate of Montreal General Hospital, at Whamcliff Military Hospital; Miss Doyle, graduate of King's County Hospital, New York, now at Netley; Miss Horsey, graduate of General Hospital, St. John's, now at Cuttenick Camp, Yorkshire; Miss McGrath, graduate of General Hospital, St. John's, now with Francis Xavier unit in France; Miss Murray, graduate of General Hospital, St. John's, now at Eccleshall.

We were glad to see again Misses Russell, Macdonald and Lloyd, who have been nursing in New York, and are now home for a holiday. Our meetings are held the 1st Thursday in each month, and the business meeting is followed by a social chat over a cup of tea, provided by each member in turn.

Within the last six weeks a camp for soldiers suffering from tuberculosis has quietly come into existence and was opened on November 2nd. The money with which it was built has been the result of lectures given by a returned soldier, Philip Jensen. He served through the Gallipoli campaign, and was badly wounded in France and sent back to his home in Newfoundland, where, in another way, he still serves his King and Country. His lectures have been arranged for by Mrs. Browning, who has identified herself with Red Cross work, and who works harder for the soldiers than most people do for their own living. These lectures have been given not only in St. John's, but at many places in other parts of the island, and bring in not only dollars, but recruits for the army and navy. The disposal of the money was left in Mrs. Browning's hands, and she decided to use part of it for the building of a camp for returned soldiers suffering from tuberculosis.

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SYDNEY, CAPE BRETON

On Wednesday, November 16, 1916, the new City Hospital of Sydney, Cape Breton, was formally opened. Many hundreds of people visited it, and admired the various items of equipment, which it is believed will meet the needs of the citizens for some time. It is most complete and up to date in all respects; the surgical appliances being the best

obtainable. A letter was read from the Lieutenant-Governor regretting his absence, and addresses were made by the Mayor, Warden Labatte, Capt. Hattie, M. D., and others. A tea followed, and all guests were conducted over the hospital, where everything was exhibited and explained by the nurses in charge. The staff consists of Miss Graham, the lady superintendent; Miss Petrie, head nurse; Miss MacKinnon, operating room supervisor; Miss Ratchford, night superintendent and four probationers who will form the nucleus of a training school.

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NOVA SCOTIA

Miss Alice Bowling, graduate of the Western Hospital, Toronto, has resigned her position as superintendent of the Children's Hospital, Halifax.

Miss Pemberton, who for several years has acted as Registrar for the Nova Scotia Graduate Nurses, has resigned. Miss Pemberton will be greatly missed in that capacity.

Miss Sait, for the past two years the efficient head nurse of the V. O. N. in Halifax, has resigned and sails for England shortly.

Miss Richardson, late superintendent of the Children's Hospital, Halifax, and Miss Winnifred Read have been appointed school nurses, in place of Miss Larkin, who resigned to take up military work.

The N. S. G. N. A. held a concert recently at the Presbyterian College Hall, in aid of the Benefit Fund.

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NEW BRUNSWICK

Miss Mina Bamford, superintendent of the Mirimichi Hospital, Newcastle, N. B., has resigned.

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QUEBEC

Miss White, until lately assistant superintendent R. V. H. Montreal, met with a painful accident in Ottawa last month; she was brought down to the Royal Victoria Hospital, and is, we are glad to say, recovering from her injuries.

Sister Dorothy Winter, R. R. C. graduate of the R. V. H., Montreal, who went over with the first contingent, is at her home, 149 Hawthorn Avenue, Ottawa, on leave till November 30th.

Mrs. J. J. McArthur (Miss B. Lamonte, class of '99 R. V. H., Montreal), who went to LaPanne in 1915 for four months' voluntary service, and was subsequently married to Dr. MacArthur, of West Kilbride, Scotland, is visiting relatives in Elmwood, Ont.

The Rev. Chas. and Mrs. Saddington, of Almonte, announce the marriage of their daughter, Hilda, to Captain Lionel Hutson, A. M. C., on Monday, October 2nd, 1916. Miss Saddington is a graduate of the R. V. H., Montreal, class of '14.

ONTARIO

Miss Mary Robinson left Collingwood, November 9th to join the Q. A. I. M. N. S.

The Alumnae Association of Collingwood sent Christmas decorations and fifty parcels for patients in Miss Morton's ward at the Ontario Military Hospital, Orpington, Kent, Eng.

A very successful "Baking" sale was held at the Nurses' Home, Collingwood, November 11th. The proceeds to go for Christmas presents for soldiers.

The Nurses' Alumnae Association of the Kingston General Hospital, met Tuesday, November 7th, at the Nurses' Home, and made arrangements for a Red Cross Tea on November 10th, which realized $115.00. Thirty-five Christmas stockings were sent to K. G. H. graduates in No. 7 Queen's University General Hospital, France and seven sent to graduates serving in England.

A letter was read from Matron Florence McAllum, asking for a donation for Christmas tree for the patients at Ramsgate Hospital, England.

Eighteen dollars was voted and spent on tobacco, gum, etc., which were forwarded to Ramsgate.

Nursing Sister Annie Hiscock of Kingston, who has been seriously ill, is much improved.

Two of our graduates, Miss G. Brown and Miss Florence Hiscock, who nursed this summer at the Richardson Convalescent Home on the Rideau River, have returned to the city.

The annual meeting of Nicholl's Hospital Alumnae Association, Peterboro, was held in the Nurses' Home November 8th. The officers for the coming year are: President, Miss Sarah Wood, 584 Charlotte Street; First Vice-President, Miss Fanny Dixon, 314 London Street; Second Vice-President, Miss Phinn, Nicholl's Hospital; Treasurer, Miss Spiers, Nicholl's Hospital; Secretary, Miss L. Fife, Box 921 Peterboro; "Canadian Nurse" Representative, Miss M. A. Ferguson, 461 Bon Accord Street.

Arrangements were made for sending Christmas boxes to Miss Beamish, and our nurses overseas. Six new graduates became members, Misses Spiers, Phinn, McCallum, Brown, Kemp and Stewart.

Miss Shearer is recovering after a very long illness.

Miss Mercier is convalescent after a serious operation.

Miss Sanderson invited the Association to hold its regular meetings at the Hospital, an invitation which was gratefully accepted. Refreshments were then served and a pleasant social hour enjoyed.

Rev. and Mrs. Stanley E. Annis have sailed for China, where they intend taking up missionary work. A little daughter was born to them August 20th at Nicholl's Hospital, of which Mrs. Annis (Miss Davis) is a graduate.

Miss Walsh has received a call for overseas service and is now in Kingston. Her brother, Dr. Stanley Walsh, who was on sick leave from Bombay, left a short time ago.

On November 12th one of our most beloved graduates passed away in the person of Rachel K. MacMillie, wife of L. P. McCullough. She will be greatly missed.

Miss Burgess, late change nurse of the operating room, Nicholl's Hospital, has resigned and is now in Kingston. She is succeeded by Miss Phinn (1916).

Capt. (Dr.) E. V. Frederick in a letter refers to the Peterborough people in the Canadian Colony in Macedonia as "all well and doing their bit." Miss Beamish is with No. 5 General Hospital, Salonika.

Dr. Frederick writes, "The most wonderful thing is the extent and type of wounds which fail to knock a man out. To-day I had a man in

GRADUATING CLASS 1916, ST. JOSEPH'S HOSPITAL, SUDBURY, ONT.

Upper Row: Miss M. Hoover, Sudbury; Miss E. Retchford, Sturgeon's Falls, Ont.; Miss A. Shannon, Cobden, Ont.; Miss D. Hayes, North Bay; Miss G. O'Brien, Brimley, Mich. Lower Row: Miss K. McMahon, Renfrew; Miss L. McDermott, Cansly, Que.; Miss H. Quinlan, North Bay; Miss E. Halverson, Kipling, Ont.

whom a piece of shell casing the size of the end of your thumb, passed in behind the hip and through the notches in the pelvic bone and lodged inside the abdomen. It carried with it a piece of cloth from his trousers which I removed through a hole in the bladder and then through the base of the bladder." Such are the interesting accounts of surgery at the front.

Nursing Sister Irene M. Douglas, of Peterborough, Ont., daughter of Nursing Sister M. Keith Douglas, a graduate of Nicholl's Hospital, who for meritorious service was decorated by the King, was united in marriage recently to Dr. J. A. Stewart, medical officer at Westcliffe Canadian Military Hospital, Folkstone, England. The bride is a grad-

uate of Brockville General Hospital. She is a granddaughter of Mr. and Mrs. Samuel Keith of this city and a niece of Nursing Sister Clara McLeod, also of Vancouver, now matron of Shorncliffe Hospital. The ceremony took place in the parish church of Folkstone. The bride and groom were both in uniform. After a brief furlough both resumed their duties. Mrs. Stewart left last spring with the Queen's Unit, and nursed first with Dr. Bowie at Moore's Barracks, Shorncliffe, afterwards being transferred to France, where she now is. Captain Stewart is a son of Mr. and Mrs. James A. Stewart, Brockville. He left with the 59th as medical officer, and is now stationed at Westcliffe Canadian Hospital.

The graduating exercises of the 1916 class of the Orillia General Hospital were held Friday evening, October 20th. Eight graduates received their diplomas and pins. A large number of friends of the nurses as well as others interested in the hospital were in attendance.

Rev. J. R. S. Boyd led in opening prayer. Rev. W. Mallot presided and gave a short but interesting address. The diplomas were presented by Miss Johnston, lady superintendent, who also read the report of the Hospital. Mrs. Ardagh presented the class pins.

Each member of the class received a copy of "Practical Dietetics" from the Ladies Auxiliary, also a beautiful bouquet of roses, and a hypodermic syringe from the medical staff. Miss Johnston gave the report of the Hospital. Rev. T. A. Symington gave an excellent address to the graduating class. The numerous and beautiful bouquets showed that the nurses were generously remembered by their friends. The graduates were: Lena Dove, Gladys Went, Mary Hawthorne, Lulu Laughlin, Lillian Mackenzie, Pearl McLeod, Cecelia Jowett and Matilda Donnelly. They have all applied for overseas service.

Miss Robinson, assistant superintendent, who was ill for some weeks, is recuperating at Gilford.

Miss Congalton is home in Guelph, nursing her father who has been ill for several months.

Miss Wood is able to be out again after a severe illness.

Miss McPhee has returned from Ottawa.

At the September meeting of the Toronto Chapter of the Graduate Nurses' Association of Ontario, a committee composed of the Presidents of the seven Alumnae Associations was appointed to arrange for Christmas Cheer Boxes to be sent to all graduates on active service who went from Toronto. After considerable work on the part of the committee, a tin box filled with Christmas cake—short bread—a cake of maple sugar and one-half dozen bars of hard chocolate was selected with a very appropriate Christmas card carrying a message of good cheer from the Toronto Alumnae Associations. Over 175 of these boxes were mailed to the nurses and in answer to a letter from the committee sent to Matron-in-Chief Macdonald asking that special effort might be made to locate

each nurse, the committee through their Secretary-Treasurer, Mrs. Aubin, received a very kind letter from Miss Macdonald, thanking the Toronto nurses for their gifts and assuring them of her personal interest in the shipment. Now all that remains is to wait patiently and see if our gifts for 1916 are more successful than those of 1915 in reaching their destination—for the magnificent Christmas offerings for No. 4 Canadian General Hospital never reached the Hospital. Why? We imagine the earth must have opened and swallowed the box for its own Christmas dinner!

The opening meeting for the season of 1916-1917 of the Toronto General Hospital Alumnae was held October 4th, a large number being present with Mrs. Aubin, the President, in the chair.

After Mrs. Aubin's address as the in-coming President, she gave a short but interesting talk on the Convention in Winnipeg, and then introduced the subject of Christmas cheer for overseas members. After a short discussion it was left with Mrs. Aubin to act as she felt was best in the interests of both the Alumnae and our nurses at the front. At the conclusion of the meeting Miss Gunn entertained the Alumnae at tea, when a very enjoyable hour was spent by all present.

On Wednesday, November 22nd, Miss Gunn, of the Toronto General Hospital and the Alumnae Association, entertained at an informal tea as a farewell to the four Toronto General Hospital graduates who have enlisted with the Queen Alexandra's Imperial Nursing Service and were leaving on the 23rd of November for England. A large number of the graduates and friends of the four "Queen Alexandra's" were present as well as the staff of the training school. There were several brides present, all lending to the enjoyment of the afternoon.

On behalf of the Alumnae, the Honorary President, Miss M. A. Sniveley, presented the guests of honor with a pocket "flashlight" with an extra battery and bulb as a small remembrance from the association.

The following evening when the train for Montreal pulled out of the Toronto Union Station, it was a mighty cheer that rose from the nurses and their friends on the platform to speed not only the Toronto General Hospital nurses but all the nineteen nurses from all parts of Military District No. 2 who have gone to serve their King and Country.

Mrs. M. A. Reid Moore (1902); Miss Catherine McGibbon (1908); Miss Ruth E. Down, (1909); Miss Florence E. Jones, (1913), all graduates of the T. G. H., left for England November 23rd, having joined the Queen Alexandra Imperial Nursing Service.

Miss Mary Stewart, late of the Toronto General Hospital, and for the last nine months superintendent of the Queen's Canadian Military Hospital, Beachborough Park, where she has done admirable work, has resigned, and is shortly proceeding to France as a member of the Canadian Army Nursing Service.

The annual meeting of the Public Health Association of Toronto was held at the City Hall on Monday, October 24th, 1916. The following officers were elected for 1916-1917: President, Miss F. Emory; Vice-President, Miss L. Conlin; Recording Secretary, Miss H. Pennock; Corresponding Secretary, Miss M. Stirret; Treasurer, Miss K. Royce; Press Representative, Miss B. Chillas; Directors, Miss D. Halley and Miss D. Robinson.

H. CARRUTHERS, Sec.-Treas.

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SASKATCHEWAN

The Saskatoon City Hospital Alumnae Association monthly meeting was held at the Nurses' Home November 14th. Much regret was expressed over the resignation of Miss Winnifred Chaughton, who has gone overseas with the Q. A. I. M. N. S. Miss A. D. Bates was asked to fill her places on the Executive. Miss Reeve read a very entertaining extract from one of her books. At the close of the meeting refreshments were served by Miss Blackwood and Miss Pearry.

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ALBERTA

Miss Legge (R. V. H.) who has been on the staff of the Royal Alexandra Hospital, Edmonton, has left for Montreal, to be night superintendent of the new Ross Pavilion of the Royal Victoria Hospital, Montreal.

Mrs. Ernest Reynolds, Edmonton (Miss E. M. Craig, R. V. H.) sailed for England November 25th to join her husband, Capt. Reynolds, who is on active service with the 194th Edmonton Highlanders, under command of Lieut.-Col. W. C. Craig.

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BRITISH COLUMBIA

Miss Thorn, of the Winnipeg General Hospital, has received the appointment of Tuberculosis Nurse for Victoria.

Eight nurses left recently for England, Mrs. Matheson, the Misses Acton, Baker, Worsey, Collison, Hutchinson, Anderson and Stark. They are connected with the Queen Alexandra Imperial Nursing Service.

The monthly meeting of the Victoria Graduate Nurses' Association was held at the Provincial Royal Jubilee Hospital, Tuesday evening, December 5th. After the usual business, Dr. A. B. Hudson gave a most interesting lecture on "Emergencies."

Miss Stone, of Calgary, Misses Bennett and Metignon of Lane Hospital, San Francisco City, have recently been appointed to the staff of the Royal Jubilee Hospital.

Miss A. M. Hardie left recently for the East to await further orders. She is going overseas with the C. A. M. C.

Miss Jessie McKenzie, lady superintendent of the P. R. J. H., is enjoying a month's vacation.

Three nurses of the Chilliwack Hospital, Misses Grimason, Anfield and Davies, graduated recently, having completed their three years' course.

B. C. NURSES LEAVE FOR ACTIVE SERVICE

In response to the recent call for volunteers by the Queen Alexandra Imperial Military Nursing Service, 14 British Columbia trained nurses have either left for England or are about to leave. Many others volunteered but a limited number only could be accepted. The main body, nine in number, left Victoria yesterday afternoon, leaving on the night boat en route to England. They were in charge of Nursing Sister G. Mathieson, a graduate of an English hospital, who has been doing special duty at Jubilee Hospital, Victoria, for some time.

Orders issued on Thursday over the signature of Major H. A. B. Hall, P. M. O., from Work Point, contained the following reference to the mobilization of drafts of qualified nurses for overseas services:

"A. M. C. nurses for overseas service—The undermentioned Nursing Sisters proceeded on the 27th inst. for overseas service with A. M. C. reinforcements: Nursing Sisters J. Morris, E. Murray, A. M. Hardie, from Victoria; B. Youdall, from Vernon.

Nursing Sisters for Queen Alexandra's Imperial Military Nursing Service—The undermentioned Nursing Sisters of the A. M. C. have been selected for service with Queen Alexandra's Imperial Military Nursing Srvice, and will proceed overseas on December 1: Nursing Sisters A. Mathieson, E. M. Aston, E. L. Anderson, G. Hutchinson, E. Butler, H. L. Stark, E. M. Collinson, A. C. Worsey, J. F. McKenzie, from Victoria; H. B. McDonald, from Vancouver.

NEW WESTMINSTER

Miss Kate Stott, a graduate of the Royal Columbian Hospital, will be offered the position of assistant superintendent of that institution, according to a decision yesterday of the Hospital Board of Management. Miss Sinclair, formerly head of the surgical department, was some time ago appointed lady superintendent and Miss Maud McLeod of Victoria, assistant superintendent. It later developed that Miss McLeod had intended her application for the position of superintendent and she declined to accept the position of assistant superintendent. Accordingly the position has been offered to Miss Stott. Miss McCue, formerly night superintendent, has been appointed head surgical nurse, and Miss McAllister has been placed in charge of the maternity department. Miss Stott is at present taking a post graduate course in Niagara, and has had experience in Toronto, Montreal, and California hospitals.—Daily "Province," Vancouver.

Miss Hazel McDonald (Royal Jubilee Hospital, Victoria, B. C.) who has been in charge of a ward in the Vancouver General Hospital, has left for active service with the Queen Alexandra's Imperial Military

Nursing Service Reserve. Miss Wilson (V. G. H.) who has also been in charge at the Vancouver General Hospital, accompanies Miss McDonald, to join the same service.

On Saturday afternoon a wedding of interest was performed at Wesley Methodist Church by Rev. Ernest Thomas. The bride, Miss Mary L. Cobbe, has recently returned from Salonika, where she was attached to the British Columbia base hospital. Miss Cobbe was born in Baldur, Man., and came to Vancouver about five years ago. The bridegroom, Mr. Bradford Willard Heyer, editor of the British Columbia "Financial Times," is well known in financial and business circles in the province. He was born in New York city, and came to Vancouver in 1911. After a short wedding tour in the south, Mr. and Mrs. Heyer will take up residence in Vancouver.—"Province," Vancouver.

Births

To Mr. and Mrs. G. I. Baldwin, M. E. M., Changli, Chihli, a daughter.

Marriages

Souter—Waddill. At Wuchang, September 12th, 1916, Rev. E. L. Souter of the A. C. M., Ichang, to Miss M. R. Waddill, A. C. M., Wuchang.

On April 12th, 1916, at the Baptist Church, Edmonton, Alberta, Florence Churchill to William Richards, of Edmonton. Mrs. Richards is a graduate of the Nova Scotia Hospital, Halifax, N. S., (1910). Mr. and Mrs. Richards will reside in Edmonton.

On October 11th, 1916, at Namao, Alberta, Margaret M. Crozier to Robert Bailey, of Edmonton. Mrs. Bailey is a graduate of a Seattle hospital. Mr. and Mrs. Bailey will reside in Edmonton.

On September 6th, 1915, at Sandgate Parish Church, Nursing Sister Edna Dow to Captain Ross Hewitt, C. A. M. C., No. 4 Canadian General Hospital. Miss Dow is a graduate of the Toronto General Hospital, class of 1911.

In September, 1916, at Toronto, Miss Agnes Kennedy to Lieutenant Brien Cooke of Calgary. Miss Kennedy is a graduate of the Toronto General Hospital, class of 1909 .

At Milton, Ont., on October 18th, 1916, Miss Margaret Telfer to Mr. Frank McDuffe. Margaret Telfer, better known as "Tiny," on account of the diminutiveness of her stature, was a graduate of the Toronto General Hospital, class of 1910, and many are the good wishes which follow this popular nurse in her new life.

At Toronto, in November, Miss Elizabeth Field to Mr. A. W. Smith, of Toronto. Miss Field is a graduate of the Toronto General Hospital, class of 1904.

At Toronto, on June 7th, Miss Pearl Allen to Mr. Percy S. McCulloch. Miss Allen is a graduate of the Toronto General Hospital, class of 1910.

Miss Jean McTavish, graduate of Toronto General Hospital, class of 1915, is leaving for England the end of November. Her marriage to Captain Van Wyck of No. 4 Canadian General Hospital, Salonika, will take place in Edinburgh early in December.

Deaths

At Kihsien, Honan, on April 9th, from typhoid fever, Miss Grace Stewart, of the United Free Methodist Mission.

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Courage for the great sorrows of life, and patience for the small ones, and then, when you have laboriously accomplished your daily task, go to sleep in peace. God is awake.—Victor Hugo.

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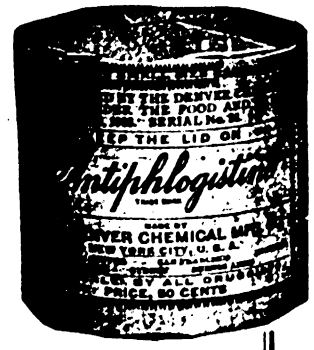

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